

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Not for submission under 37 CFR 1.99)

Application Number	10/594,127
Confirmation Number	8975
Filing Date	September 25, 2006
First Named Inventor	Akio SUGIHARA
Art Unit	1625
Examiner Name	Niloofer RAHMANI
Attorney Docket Number	Q97391

## U.S. PATENTS

Examiner Initials*	Cite No	Patent Number	Kind Code <sup>1</sup>	Issue Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

## U.S. PATENT APPLICATION PUBLICATIONS

Examiner Initials*	Cite No	Publication Number	Kind Code <sup>1</sup>	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

## FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No	Foreign Document Number <sup>2</sup>	Country Code <sup>2</sup>	Kind Code <sup>4</sup>	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>5</sup>
	1.	2006/070735	WO	A1	2006-07-06	Astellas Pharma Inc, et al.		Abstract

## NON-PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	T <sup>5</sup>

## EXAMINER SIGNATURE

Examiner Signature	Date Considered
/Niloofer Rahmani/	09/12/2011

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## CERTIFICATION STATEMENT

Please see 37 CFR 1.97 and 1.98 to make the appropriate selection(s):

- ☒ That each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of the information disclosure statement. See 37 CFR 1.97(e)(1).

### OR

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- ☒ Fee set forth in 37 CFR 1.17 (p) has been submitted herewith.

- ☒ The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

- ☐ None

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**6555**

CUSTOMER NUMBER

## SIGNATURE

A signature of the applicant or representative is required in accordance with CFR 1.33, 10.18. Please see CFR 1.4(d) for the form of the signature.

Signature	/Jennifer M. Hayes/	Date (YYYY-MM-DD)	2011-08-26
Name/Print	Jennifer M. Hayes	Registration Number	40,641

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/Niloofer Rahmani/

09/12/2011

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